



Connection

6051 Old Bagdad Highway, Milton, FL 32583

Phone (850) 981-7000

Fax (850) 623-1208

TO: Roofing Contractors
FROM: Rhonda Royals, Building Official
SUBJECT: Reroofing Inspection Procedure Change
DATE: August 19, 2014

It has recently come to our attention that roofing affidavits are being submitted to local building departments attesting to strengthening or correcting roof-decking attachments and fasteners, installing secondary water barrier and/or roof-to-wall connections when in fact some of the required mitigation, in particular roof decking strengthening, has not been performed. Any licensed professional caught providing untruthful information that creates a misrepresentation of fact may be committing fraud and will be dealt with accordingly.

Therefore, effective immediately the notarized reroofing mitigation affidavit, along with photographs of the roof, shall be submitted to the Santa Rosa County Development Services Department prior to a final inspection being performed. The affidavit and photographs can be brought into the office, faxed to (850) 623-1208, emailed to: permitanalysts@santarosa.fl.gov, or left on the job site.

Photographs of the roof shall include:

1. the permit number or address clearly shown,
2. view of the roof deck nailing pattern, and
3. view of the secondary barrier

This affidavit is required for single family site built homes with shingle roofs.



Santa Rosa County Development Services



Beckie Cato, AICP
Planning and Zoning Director

Tony Gomillion
Public Service Director

Rhonda C. Royals
Building Official

Fasteners and Secondary Water Barrier Inspection Affidavit

Permit # _____

I, _____ licensed as a(n) ☐ Contractor*
(Please print name and check License Type.) ☐ Engineer/Architect
☐ FS 468 Building Inspector*

License #: _____

hereby certify that on _____, did personally inspect the roof deck nailing
(Date & time)
and secondary water barrier work at _____.
(Job Site Address)

Based upon that examination I have determined the installation was done according to the Hurricane Mitigation Retrofit Manual
(Based on 553.844 F.S.)

Contractor's Signature

STATE OF FLORIDA

COUNTY OF _____

Sworn to and subscribed before me this _____ day of _____, 20 ____ by

_____.

(Seal)

Notary Public

Personally known _____ or
Produced Identification _____
Type of identification produced. _____

*General, Building, Residential or Roofing Contractor, or any individual certified under F.S. 468 to make such inspections.

The notarized affidavit and photos must be submitted to the Santa Rosa County Development Services Department prior to final inspection. The inspection cannot be passed until the affidavit is received. The affidavit can be brought to the office, e-mailed to permitanalysts@santarosa.fl.gov, faxed (850) 623-1208, or left at the job site for the inspector to pick-up.

Santa Rosa County Public Service Complex
6051 Old Bagdad Highway, Suite 202 Milton, Florida 32583
www.santarosa.fl.gov
Office: (850) 981-7000

Inspections/Compliance Division Fax: (850) 623-1208 • Planning/Zoning Division Fax: (850) 983-9874 • Commercial Review Fax: (850) 623-1381